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CONFIRMATION NO. 6355

SERIAL NUMBER 10/675,610	FILING OR 371(c) DATE 09/29/2003 RULE	CLASS 623	GROUP ART UNIT 3731	ATTORNEY DOCKET NO. ACS 64021	
APPLICANTS Carla Rosa Pienknagura, Santa Clara, CA;					
** CONTINUING DATA ***** <i>none b2</i>					
** FOREIGN APPLICATIONS ***** <i>none b2</i>					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/07/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance Verified and Acknowledged <i>gervul</i> Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 10	TOTAL CLAIMS 31 30	INDEPENDENT CLAIMS 2
ADDRESS 24201					
TITLE Intravascular stent with extendible end rings					
FILING FEE RECEIVED 948	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		